

BEST AVAILABLE COPY

CLAIMS ONLY						SERIAL NO.		FILING DATE		
						APPLICANT(S)				
CLAIMS										
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		* IND.	* DEP.	* IND.	* DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.				
1							51			
2							52			
3							53			
4							54			
5							55			
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43							93			
44							94			
45							95			
46							96			
47							97			
48							98			
49							99			
50							100			
TOTAL IND.	[]	-	[]	-	[]	↓	TOTAL IND.	[]	↓	[]
TOTAL DEP.	[]	←	[]	←	[]	←	TOTAL DEP.	[]	←	[]
TOTAL CLAIMS	[]	[]	[]	[]	[]	[]	TOTAL CLAIMS	[]	[]	[]

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS